STATE OF NEW HAMPSHIRE

for LOBBYISTS

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JUN 02 2017

NEW HAMPSHIRE

2017 Statement of Income and Expenses (RSA Chapter 15) PLEASE PRINT 11

I. Name of Lobb	oyist(s) Kang	LRLY COR	nie		DEPARTMENT OF STATE
II. Name of lobb	yist's partnershi	, firm or corporatio	n, if any:		
145 Ho	e New Hampshire :rsh illis St., Unit C ester, NH 03101	ip, firm or corporation)			
Business Address:	(Street)	(Town/C	ity)	(State)	(Zip Code)
(603) 669-24 (Telepho	Hone)	_ 6031645-6	(Fax)	e-mail <i><u>k<i>Coro</i>n</u></i>	is@breathenh.org
III. This stateme reportable expen	ent covers: (Choonse transactions v	se one – file separate vhich are not attribu	reports for extable to any o	ach client, OR you ma ne client).	y file a separate report for
☐ All reportable	e transactions occu	rring in the months pr	ior to the repo	rting date relative to the	e following client:
<u>OR</u>	(Full Name o	of Client as it appears on	the Lobbyist Re	egistration Form)	<u> </u>
☐ All reportable unrelated to any p	transactions by the particular client.	e lobbyist (including t	he lobbyist's f	amily), or the lobbying	firm listed below which are
IV. Date of Repo	. ,	017 M fregistration to 3/31/17	activii	July 26, 2017 // hy from 4/1/17 to 6/30/17	
	October 25 activity from 7	5, 2017 [] ////17 to 9/30/17	activi	January 31, 2018 : ☐ ty from 10/1/17 to 12/31/	17
	ked, complete just			ctions made since th ary of State's Office, St	
VI. Check if add	itional reports ar	e attached:			
☐ If you have re	eceived fees or ma	de expenditures, you i	must file Adde	ndum A- Fees and Ex	penses
☐ If you have p Expense Reimbur		or reimbursed expens	ses, you must f	ile Addendum B – Rep	port of Honorariums or
•		y has made political co	ontributions, y	ou must file Addendu i	m C- Political Contributions
I have read RSA	t/Affirmation by 15, RSA 15-B, RS he best of my know byist)	A 14-C and RSA 664	and hereby sw	rear or affirm that the fo	oregoing information is true
(Print Name of lo	obbyist)				

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

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(RSA Chapter 15:6)

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I. Name of Lobbyist(s) KMBELLY CIRCUITS	NEW HAMPSHIRE DEPARTMENT OF ST
II. Name of lobbyist's partnership, firm or corporation, if any:	
BLUATHE NEW HAMPSHIRE	
(Name of partnership, firm or corporation)	
III Name of Client	Data
III. Name of Client	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified abo to lobbying, including fees for services such as public advocacy, governme including research, monitoring legislation, and related legal work. The reduced by any expenses:	ent relations, or public relations services
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar	
c) Total of all fees received to date	
(Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report expenses are to be reported in one of three categories of expenses: (a) during the reporting period for salaries, benefits, support staff, and office individual expenses where the expenditure was of \$25.00 or less (for exam lunch where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being lob (c) an itemized statement of each individual expenditure made during this reany purpose not covered by (a) (for example: purchase of a meal with veremonial object to be given to the subject of lobbying with a value gre restaurant expenses for a legislative reception). Expenses for honorarium contributions will be reported on separate addendums and should not be reported.	th client and if expenditures are made by t may be filed for the lobbyist(s)/firm. the aggregate total of all expenses paid expenses; (b) the aggregate total of all expenses than \$10 that is given to the person bied with a value of \$25.00 or less); and exporting period of greater than \$25.00 for alue of greater than \$25, purchase of a exact than \$25, but not greater than \$50, ms, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reporte	a)\$_\frac{1,825125}{6} b)\$_\frac{6}{5}
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$ 1,825, 25
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	ns_1,825.25
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	/
(Signature of lobbyist) KAMBERLY GROWF (Print Name of lobbyist)	5/31/17
Variation Company	(Date)
(Print Name of lobbyist)	